

NY 11342

**OFFICIAL WARNING**



**VIOLATION OF FEDERAL REGULATIONS**

VIOLATOR

Customer # 321092  
Certificate # 21-A-0150  
Dan and Clara Byler  
Bylers Kennel

ADDRESS (Street, City, State, Zip Code)

2994 County Route 84  
Troupsburg, NY 14885

The Department of Agriculture has evidence that on or about **May 28, 2011 - January 11, 2011 - May 26, 2010** you or your organization committed the following violation of Federal Regulations:

**9 CFR, SECTION**

**Failure to**

**2.40 (b) (2)**

- Establish and maintain adequate veterinary care that includes the use of appropriate methods to prevent, control, diagnose, and treat diseases and injuries, and the availability of emergency, weekend, and holiday care.

(\*Dog #19 was heavily matted in the ears, legs, and under body as well as multiple other dogs.

\*\*One cocker spaniel showed lack of proper ear care.

\*\*\*Many of the dogs have very overgrown nails.)

**3.11 (a)**

- Remove excreta and food waste from primary enclosures daily, and clean as often as necessary under primary enclosures to prevent excessive accumulation of feces and food waste, prevent soiling of the dogs and cats contained in the primary enclosures, to reduce disease hazards, insects, pests and odors.

(\*Dirty whelping boxes with excess feces and urine soaked carpet.

\*\*Dirty wire mesh and old feces accumulated in waste pans underneath.

\*\*\*Accumulated feces in outdoor runs.)

Titles 7 & 9 Code of Federal Regulations were promulgated to help prevent the spread of animal and plant pests and diseases and assure the humane treatment of animals. Since violations of the regulations can have serious and costly impact detrimental to the public interest, you are warned of this violation. Any further violation of these regulations may result in the assessment of a civil penalty or criminal prosecution. If you have any questions concerning this warning or violation, please contact the listed APHIS Official.

APHIS OFFICIAL (Name and Title)

**Elizabeth Goldentyer, DVM**

**Regional Director**

SIGNATURE

DATE ISSUED

OFFICE ADDRESS:

**920 Main Campus Dr., Suite 200  
Raleigh, NC 27606**

**TELEPHONE NO. AC (919) 855-7100**

DATE RECEIVED:

FOR PERSONAL SERVICE - RECEIVED BY: (Name and signature)

FOR CERTIFIED MAIL - RECEIPT NO:

**7007 0710 0000 9577 7193**